



PTO/SB/21 (08-00)

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	Application Number	09/970,929
	Filing Date	October 5, 2001
	First Named Inventor	Jun KOYAMA et al.
	Group Art Unit	2629
	Examiner Name	Srilakshmi K. Kumar
Attorney Docket Number		0756-2368

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application/Corrected Application Papers <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosures 1. 2. 3. 4. 5. 6.
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50- 2280 for the above identified docket number.

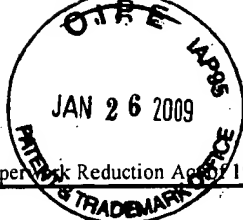
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eric J. Robinson, Reg. No. 38,285 Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, VA 20165
Signature	
Date	January 23, 2009

CERTIFICATE OF MAILING

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Type or printed name	Adele M. Stamper		
Signature		Date	January 23, 2009

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**FEE TRANSMITTAL
FOR FY 2009**

Effective 10/02/2008. Patent fees are subject to annual revision.

☐ Applicant Claims small entity status. See 37 CFR 1.27.**TOTAL AMOUNT OF PAYMENT** (\$130.00)**Complete if Known**

Application Number	09/970,929
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First Named Inventor	Jun KOYAMA et al.
Examiner Name	S. Kumar
Group Art Unit	2629
Attorney Docket No.	0756-2368

METHOD OF PAYMENT

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number

50-2280

Deposit
Account
NameRobinson Intellectual Property
Law Office

- ☒
- Charge Any Additional Fee Required
-
- Under 37 CFR 1.16 and 1.17 and
-
- credit overpayments

☐ Applicant claims small entity status.
See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:

☒ Check ☐ Credit Card ☐ Money
Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1001 330	2001 165	Utility filing fee	
1111 540	2111 270	Search fee	
1311 220	2311 110	Examination fee	
Over 100 Sheets/270 for each additional 50			

SUBTOTAL (1)**2. EXTRA CLAIM FEES**

Total Claims		-20** =		X	\$52	=	
Independent Claims		-3** =		X	\$220	=	
Multiple Dependent						=	

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1202 52	2202 26	Claims in excess of 20	
1201 220	2201 110	Independent claims in excess of 3	
1203 390	2203 195	Multiple dependent claim, if not paid	
1204 220	2204 110	** Reissue independent claims over original patent	
1205 52	2205 26	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	130	2251	65	Extension for reply within first month	\$130.00
1252	490	2252	245	Extension for reply within second month	
1253	1,110	2253	555	Extension for reply within third month	
1254	1,730	2254	865	Extension for reply within fourth month	
1255	2,350	2255	1,175	Extension for reply within fifth month	
1401	540	2401	270	Notice of Appeal	
1402	540	2402	270	Filing a brief in support of an appeal	
1403	1,080	2403	540	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	540	2452	270	Petition to revive - unavoidable	
1453	1,620	2453	810	Petition to revive - unintentional	
1501	1,510	2501	775	Utility issue fee (or reissue)	
1502	860	2502	430	Design issue fee	
1503	1,190	2503	595	Plant issue fee	
1462	400	1462	400	Petitions, Group I	
1463	200	1463	200	Petition, Group II	
1464	130	1464	130	Petitions, Group III	
1807	50	1807	50	Processing fee under 37 CR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	810	2809	405	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	810	2801	405	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify) _____					

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

\$ 130.00

CERTIFICATE OF MAILING/TRANSMISSION

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SUBMITTED BY**Complete (if applicable)**

Name (Print/Type)	Eric J. Robinson	Registration No. (Attorney/Agent)	38,285	Telephone	(571) 434-6789
Signature				Date	January 23, 2009